U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number  PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875  Application or Discket Number OF FORM PTO-875											ontrol number.
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY		OTHER THAN SMALL ENTITY		
FOR NUMBER FILED NUMBER EXTRA					RATE	FEE		RATE	FEE		
	C FEE FR 1.16(a))		1 2					s	OR		s
	AL CLAIMS FR 1.16(c))	22	minus 20	- ·			x \$=		OR	x \$=	1-1-0
INDE	PENDENT CLAIM	is D	minus 3	<u> </u>			x s=		OR	x s=	22
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$=		OR	+ \$=	4
* If the difference in column 1 is less than zero, enter *0* in column 2.							TOTAL		OR	TOTAL	Ĺ <u></u>
CLAIMS AS AMENDED - PART II  (Column 1) 6 2 2 column 3)							SMALL E	ENTITY	OR		R THAN ENTITY
A TN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	21	Minus	. 22	=		x s=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	·W	Minus	··· 27	=		x s=		OR	x \$=	
A	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))		+s =		OR	+ s=	
	8-6-04								OR	TOTAL ADD'L FEE	
<u> </u>		(Column 1)		(Column 2)	(Column 3)	1		Τ	1		
NT B		CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	•	Minus	••	=		x s=		OR	x s=	
ENDMENT	Independent (37 CFR 1.16(b))	•	Minus				x s=		OR	x s=	
AM	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))		+s =		OR	+ s =	
						<b>.</b>	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	1			7		<del></del>
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ĭ.	Total (37 CFR 1.16(c))	•	Minus	••	=	1	x \$=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	•••	=	1	x s =		OR	x s=	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1	+s=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	" If the "Highest	column 1 is less the Number Previousl Number Previously	ly Paid For v Paid For	" IN THIS SPACE " IN THIS SPACE	is less than 20 is less than 3, 6	r, er ent	nter "20". er "3".	. 4	<del>-</del> a	column 1.	

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

